

ANNEXES

Supplementary Table 1. Antibiotic and resistance patterns in Community-Acquired Pneumonia (n=73)

	AMN	BLA	CAR	FQL	GLY	IMD	MLS	OXZ	PHE	TET	TMP
Recommendations considering resistance patterns											
Antibiotic used as an alternative because of high resistance rate	—	4(5.5%)	2(2.7%)	8(11.0%)	—	—	8 (11.0%)	—	—	5(6.8%)	1(1.4%)
Antibiotic not indicated because of high resistance rate	—	—	—	1(1.4%)	—	—	1 (1.4%)	—	—	1(1.4%)	—
Resistance risk	—	10(13.6%)	1(1.4%)	8(11.0%)	—	1 (1.4%)	5 (6.8%)	—	—	1(1.4%)	—
Resistance dosage	—	8(11.0%)	—	—	—	—	—	—	—	—	—
Atypical pathogens	—	—	—	2(2.7%)	—	—	17 (23.3%)	—	1(1.4%)	11(15%)	1(1.4%)
MRSA risk	—	—	—	—	5(6.8%)	—	3 (4.1%)	6(8.2%)	—	1(1.4%)	—
MDR risk	—	—	1(1.4%)	—	—	—	1 (1.4%)	—	—	—	—
PRSP risk	—	7(9.6%)	—	2(2.7%)	—	—	1 (1.4%)	—	—	—	—
Pseudomonas risk	9(12.3%)	14(19.1%)	12(16.4%)	10(13.7%)	—	—	9 (12.3%)	—	—	—	—
B-lactamase	1(1.4%)	7(9.6%)	—	1(1.4%)	—	1 (1.4%)	1 (1.4%)	—	—	—	—

AMN: Aminoglycosides; **BLA:** βlactam; **CAR:** Carbapenems; **FQL:** Fluoroquinolone ; **GLY :** Glycopeptids ; **IMD :** Imidazoles derivatives ; **MLS :** Macrolides, Lincosamides, Streptogramins ; **OXZ :** Oxazolidinones ; **PHE :** Amphenicoles ; **TET :** Tetracyclines ; **TMP :** Trimetoprim derivatives; **Resistance risk :** antibiotic used only if there is a risk of increasing resistance (e.g. recent use of critical AB during past months) ; **Resistance dosage :** antibiotic used at high dosage if there is a risk of resistant strains ; **Atypical pathogens :** Risk of atypical pathogens ; **MRSA risk :** Risk of meticillin-resistant *Staphylococcus aureus* (MRSA) ; **MDR risk :** Risk of Multi Drug Resistant strains ; **PRSP risk :** Risk of penicillin resistant *Streptococcus pneumonia* (PRSP) ; **Pseudomonas risk :** Risk of *Pseudomonas aeruginosa* ; **βlactamase risk :** Risk of strains producing β-lactamase

Supplementary Table 2. Antibiotic and resistance patterns in Urinary Tract Infections (n=63)

	ABL	AMN	BLA	CAR	FOF	FQL	NTF	TMP
Recommendations considering resistance patterns								
Antibiotic used as an alternative because of high resistance rate	—	—	5 (7.9%)	—	1 (1.6%)	8(12.7%)	—	2(3.2%)
Antibiotic not indicated because of high resistance rate	—	—	5(7.9%)	—	—	2(3.2%)	—	1(1.6%)
Resistance risk	—	3 (4.8%)	1 (1.6%)	1 (1.6%)	—	2(3.2%)	2(3.2%)	1(1.6%)
Resistance AB	—	2 (3.2%)	2(3.2%)	—	1(1.6%)	1(1.6%)	—	1(1.6%)
Resistance threshold	1(1.6%)	—	—	—	—	2(3.2%)	—	8 (12.7%)
MDR risk	—	2(3.2%)	—	2(3.2%)	—	—	—	—

ABL: Apparented to βlactam ; **AMN:** Aminoglycosides ; **BLA :** βlactam ; **CAR :** Carbapenems; **FOF :** Fosfomycin derivatives ; **FQL :** Fluoroquinolone ; **NTF:** Nitrofurantoin ; **TMP :** Trimetoprim derivatives ; **Resistance risk :** antibiotic used only if there is a risk of increasing resistance (e.g. recent use of critical AB during past months) ; **Resistance threshold :** antibiotic used only under a certain threshold of resistance ; **Resistance AB :** antibiotic used if first line AB is resistant ; **MDR risk :** Risk of Multi Drug Resistant strains

Supplementary Table 3. Antibiotic and resistance patterns in Acute Otitis Media (n=42)

	BLA	FQL	MLS	OXZ	TMP
Recommendations considering resistance patterns					
Antibiotic used as an alternative because of high resistance rate	4 (9.5%)	—	3 (7.1%)	—	—
Antibiotic not indicated because of high resistance rate	—	—	—	—	1 (2.4%)
Resistance risk	4 (9.5%)	—	—	—	—
Resistance dosage	7 (16.7%)	—	—	—	—
MDR risk	—	1 (2.4%)	—	1 (2.4%)	—
PRSP risk	5 (11.9%)	—	1 (2.4%)	—	—
B-lactamase	11 (26.2%)	—	—	—	—

BLA : β lactam ; **FQL** : Fluoroquinolone ; **MLS** : Macrolides, Lincosamides, Streptogramins ; **OXZ** : Oxazolidinones ; **TMP** : Trimetoprim derivatives ; **Resistance risk** : antibiotic used only if there is a risk of increasing resistance (e.g. recent use of critical AB during past months) ; **Resistance dosage** : antibiotic used at high dosage if there is a risk of resistant strains ; **MDR risk** : Risk of Multi Drug Resistant strains ; **PRSP risk** : Risk of penicillin resistant *Streptococcus pneumonia* (PRSP) ; **β -lactamase risk** : Risk of strains producing β lactamase

Supplementary Table 4. Antibiotic and resistance patterns in Rhinosinusitis (n=39)

	BLA	FQL	MLS	OXZ	TMP
Recommendations considering resistance patterns					
Antibiotic used as an alternative because of high resistance rate	1 (2.6%)	3 (7.7%)	—	—	—
Antibiotic not indicated because of high resistance rate	2 (5.1%)	—	3 (7.7%)	—	3 (7.7%)
Resistance risk	2 (5.1%)	2 (5.1%)	—	—	—
Resistance dosage	8(20.5%)	—	—	—	—
Resistance threshold	—	—	2 (5.1%)	—	—
PRSP risk	5(12.8%)	—	1 (2.6%)	1 (2.6%)	—
B-lactamase	8(20.5%)	—	—	—	—

BLA : β lactam ; **FQL** : Fluoroquinolone ; **MLS** : Macrolides, Lincosamides, Streptogramins ; **OXZ** : Oxazolidinones ; **TMP** : Trimetoprim derivatives ; **Resistance risk** : antibiotic used only if there is a risk of increasing resistance (recent use of critical AB during past months) ; **Resistance dosage** : antibiotic used at high dosage if there is a risk of resistant strains ; **Resistance threshold** : antibiotic used only under a certain threshold of resistance ; **PRSP risk** : Risk of penicillin resistant *Streptococcus pneumonia* (PRSP) ; **β -lactamase risk** : Risk of strains producing β -lactamase

Supplementary Table 5. Antibiotic and resistance patterns in Pharyngitis (n=34)

	BLA	FQL	MLS	TET	TMP
Recommendations considering resistance patterns					
Antibiotic used as an alternative because of high resistance rate	1 (2.9%)	—	—	—	—
Antibiotic not indicated because of high resistance rate	2 (5.9%)	1 (2.9%)	—	2 (5.9%)	1 (2.9%)
Resistance threshold	—	—	2 (5.9%)	—	—
Atypical pathogens	—	—	1 (2.9%)	—	—

BLA : β lactam ; **FQL** : Fluoroquinolone ; **MLS** : Macrolides, Lincosamides, Streptogramins ; **TET** : Tetracyclins ; **TMP** : Trimetoprim derivates ;
Resistance threshold : antibiotic used only under a certain threshold of resistance ; **Atypical pathogens** : Risk of atypical pathogens